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Secretary of State

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NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 726005

1. Corporation Name
HILLSBORO LANDINGS ONE ASSOCIATION, INC.

Principal Place of Business 1631 RIVERVIEW RD. DEERFIELD BEACH FL 33441	Mailing Address 1215 E HILLSBORO BLVD. DEERFIELD BEACH FL 33441
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2. Principal Place of Business 21 Suite; Apt. #; etc.	2a. Mailing Address 26 Suite; Apt. #; etc.	3. Date Incorporated or Qualified 04/05/1973
22 City & State	27 City & State	4. FEI Number 59-1496625
23 Zip Country	28 Zip Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
24	29	30
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent

CAMPBELL PROPERTY MANAGEMENT
1215 E. HILLSBORO BLVD.
DEERFIELD BEACH FL 33441

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when registering)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
T/D REICHERT, CHET 1631 RIVERVIEW DR. DEERFIELD BCH, FL 00000 33441	<input type="checkbox"/> DELETE	1.1 TITLE REICHERT, CHESTER K. 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
VP FERGUSON, ROBERT 1631 RIVERVIEW RD. DEERFIELD BEACH FL 33441	<input type="checkbox"/> DELETE	2.1 TITLE P/D 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
D TRAUB, JAMES 1631 RIVERVIEW RD. DEERFIELD BEACH FL 33441	<input checked="" type="checkbox"/> DELETE	3.1 TITLE D 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
P MUELHAUSER, ELMER 1631 RIVERVIEW DRIVE DEERFIELD BEACH FL 33441	<input checked="" type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
S/D BRAUTIGAN, MARY 1631 RIVERVIEW DRIVE DEERFIELD BEACH FL 33441	<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
D BOSS, CHARLES 1631 RIVERVIEW DRIVE DEERFIELD BEACH FL 33441	<input checked="" type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REICHERT 4/20/99 954-457-8770 Christen K. Reichert
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (1/198)